



Seychelles Civil Aviation Authority

To be sent to: Safety Regulation
 Seychelles Civil Aviation Authority
 P.O. Box 181
 Victoria
 Mahé
 Seychelles

E-mail to: **smda@scaa.sc**

AERODROME OCCURRENCE REPORT

Complete form Electronically and send via E-mail, by pressing the '**Submit Report**' button on *Page 3*, or Print and send to above address.
 (Fill all sections where information is relevant)

SCAA Occurrence No.

If the Report is **Voluntary** and not under any Mandatory requirements, Can the information be published in the interests of improving Safety?

YES NO

TYPE OF OCCURRENCE

- Aircraft and Obstacle (wildlife/ bird strike/ FOD)
- Aircraft and Aerodrome (collision/ near collision/ incursion/ excursion)
- Services or Functions (loss of/ deficiencies/ lighting/ markings/ RFFS/ communication)
- Ground Handling (passengers/ cargo/ fuelling/ damage caused by vehicles/ personnel)

AERODROME
(ICAO Code):

DATE OF OCCURENCE
(dd/mm/yyyy) :

TIME OF OCCURENCE
In local time (hh:mm):

ORGANISATIONS INVOLVED

VEHICLES INVOLVED:

- | | | | |
|-----------------|--------------|-------|------|
| Tow Truck | Tug | OPS | Step |
| Maintenance van | Water bowser | Other | |

AIRCRAFT INVOLVED (If more than one, clearly identify corresponding Aircraft details with identical numbers)

REGISTRATION: TYPE AND SERIES

OPERATOR: POSITION OF AIRCRAFT

NUMBER OF PERSONS INVOLVED

INJURIES TO PERSONS

FATAL: SERIOUS: MINOR:

WEATHER:

- | | | | | | | |
|---------------|--------------------------|------|-----------|------------------|------|-------|
| OAT (°C) | Wind Direction (degrees) | | | Wind Speed (Kts) | | |
| Cloud cover | CAVOK (clear) | Few | Scattered | Broken | | |
| | Overcast | | | | | |
| Precipitation | None | Rain | Drizzle | Mist | Haze | Smoke |
| | Other | | | | | |

Visibility (m)

LOCATION OF OCCURENCE

Apron	Parking Bays
Taxiway	Runway
NPA	Service/ Access Road
Other	

Please specify where exactly at location. eg: Taxiway Alpha

EQUIPMENT AND FACILITIES

(Please indicate status and choose appropriate equipment or facility below)

	Physical Damage	Malfunction	Missing	Misleading	Hidden
Status					

Lights

Apron
Taxiway
Runway
PAPI
Threshold
Approach
Obstacle
Traffic light
Other

Air Navigation Systems

ILS
Localiser
VOR
Other

Signs and Markings

Runway
Taxiway
Hold
Terminal
Parking Bay
Other

FOREIGN OBJECT DEBRIS (FOD)

Type	Rock	Concrete	Luggage	Metal	Rubber
	Other				

Location

DESCRIPTION OF OCCURRENCE

REPORTER DETAILS

Name: Surname: Address and Tel No.
(If reporter wishes to be contacted privately)

E-mail

Organisation Position

Date *(dd/mm/yyyy)* Signature

For SCAA Use Only

Received by: Date *(dd/mm/yyyy)*
